



Draft Logo
v1.0

Two Year Demonstration Project

Min. Funding Needs FY1: **\$15,000**

Min. Funding Needs FY2: **\$10,000**

Sources For Continuation: **Annual Campaign, Business Underwriting, Grant and Foundation Support**

Primary Geographic Impact: **Wards One and Two of the City of Columbia**

Initial Target Audience: **WIC-Food Stamp Recipients with Emphasis on Pregnant Women and Single Dads**

Expansion Targets for Future Years: **Poverty Rate Formula Basis To Be Determined, Mid-Missouri**

Prepared by: **Casey Corbin, Sustainable Farms and Communities, Inc**

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Access to Healthy Food Program (AHF)

Key Partners

- ✓ Sustainable Farms and Communities, Inc. (SF&C)
- ✓ The Columbia Farmers' Market (CFM)
- ✓ PedNet
- ✓ The Columbia Department of Public Health and Human Services (CDPH)
- ✓ 6-12 Partner Agencies To Be Identified for Phase II

Suggested:

Central Missouri Community Action
Volunteer Action Center
Salvation Army
Centro Latino
Central Missouri Food Bank

Synopsis

The Access to Healthy Foods Program creates the opportunity for economically disadvantaged individuals to access fresh, local, safe and healthy foods from the Columbia Farmers' Market vendors at a significantly reduced costs through a system based on personal responsibility and progressive self-sufficiency.

Mission

The Access to Healthy Foods Program seeks to increase the number of Mid-Missourians who have affordable access to fresh, local, safe and healthy foods.

Program Description - A Client's Experience

Our client is Helen. She has one small children with one on the way and is currently utilizing Food Stamps and enrolled in the WIC program. Given her limited funds, Helen has little choice in selecting food for her family. She must shop at a large box-store where she is able to buy bulk packaged foods at low prices. Unfortunately, these food products tend to be highly processed, poor quality, high in fat, low in recommended nutritional value and can lead to obesity and poor general health. There are countless studies supporting the fact that normal fetal development is directly connected to proper nutritional choices made by the expectant mother. Brain development is especially susceptible to inhibited progress due to insufficient nutrients. Similarly, there are many studies showing the links between early development and the learning capacity of toddlers due to nutritional considerations.



Based upon research conducted by SF&C in Wards One and Two, people who identified "cost" as the primary barrier to shopping at the Columbia Farmers' Market also overwhelmingly (90%+) associated market food with the words "healthy" and "nutritious." Thus, there is clear indication that residents already understand the benefits of market food and that cost is the factor that prevents them from accessing these foods.



Helen is utilizing casemanagement services at CDPH. The case manager, who is well versed in the benefits of the AHF program, asks a series of simple questions to determine if Helen is interested in this healthy choice. These questions center on Helen’s awareness of the impact of food choices on general health and her willingness to recognize the value of healthier food choices. Helen expresses her desire to give her family better food options. The case manager then enrolls Helen in the AHF program by giving her the 30 day shopping card and a flier that explains how it is used. Her AHF card is recorded by its unique serial number and entered into a database along with identifier information and any health statistics CDPH may seek to track. Whether Helen is interested in the program or not, she is offered a flier about the CFM and the benefits of fresh, local, safe and healthy foods.

Helen now takes her family to the Columbia Farmers’ Market for a wonderful morning of community and shopping. She visits the CFM EBT station and shows her AHF and EBT cards to the market staff. Helen requests \$20 from her EBT card but receives \$40 in tokens. The transaction information is recorded in to a log book by card number identifier. Helen has just received \$2 for every \$1 of her food stamp withdrawal. The entire CFM is now available to her for 50% of cost. There is no stigma or conversation at the individual vendor booths. Helen simply makes her choices and hands \$2 tokens to the vendors for her purchases. But Helen has even more to look forward to as many vendors are identifying their booths as “Helping Hand” members with a sign hanging from their booths that matches the AHF logo. Helen can shop with those vendors, showing her AHF card briefly, and receive additional discounts. For example, one vendor has already agreed to sell all of his produce to AHF clients at 25% off. That is a 75% savings to Helen and makes the CFM more affordable than even the giant box stores! Another vendor has agreed to discount his fresh, grass-fed ground beef at a significant discount to AHF clients. Now the CFM is not only attractive for its health benefits but it becomes the cheapest option for Helen and others to purchase produce, meats, cheeses, breads and more. The best foods are now accessible to Helen and her children.

At the end of each market day, the data gathered from card usage is entered into a database to determine participation rates. Money is transferred to the CFM to cover the doubling of tokens on a TBD basis.

Inputs

Minimum FY1 \$15,000

- 1. \$1000 5,000 tokens for CFM
- 2. \$1200 Printing of FY1-2 information handouts
- 3. \$1,000 Unanticipated costs
- 5. \$11,800 Initial Fund with carry over to FY2*

Minimum FY2 \$10,000

- 1. \$10,000 2nd year fund*

*We will seek raise additional funds to augment each FY.

Goals

Short Term

1. Increase usage of CFM EBT machine by 50% FY1 and 200% FY2
2. Demonstrate success of program with 50 AHF cards utilized in FY 1 and 100+ FY2
3. Build AHF fund by FY3 to >\$25,000
4. Utilize social media, and PR to garnish national attention and foster adoption of AHF in other communities

Long term

5. Enroll 250+ clients per season
6. Add new partner agencies to refer to CDPH
7. Increase target group to include a poverty formula basis through referral partners
8. Increase annual fund size to \$50,000+
9. Work with local grocery stores and CoOps to gain their participation in the program during winter months

Marketing

The AHF fund would be refilled with a fall through winter annual campaign including local business, private donors, city and state contributions if available and grant and foundation support. The amount available would be announced in the spring, prior to the opening day of the market via the mediums below.

Dissemination of AHF information to secure acceptance and usage:

Churches

Program Partners

Health Dept

Food Stamp Office

Public Schools

CFM Radio Ads

TV/Radio PR

National PR for encouraging replication of model

